

April 15, 2019

Ms. Marlene Dortch Secretary, Federal Communications Commission CG Docket Nos. 03-123 and 13-24 Washington, DC 20554

RE: IP CTS Improvements and Program Management; Notice of Proposed Rulemaking

## Dear Secretary Dortch:

On behalf of the American Speech-Language-Hearing Association, I write to offer comments on the March 14, 2019, *Federal Register* notice of proposed rulemaking (NPRM) from the Federal Communications Commission (FCC) that proposes changes to the administration of internet protocol captioned telephone service (IP CTS), which would impact accessibility as well as functionality of the service for those in need of IP CTS.

The American Speech-Language-Hearing Association (ASHA) is the national professional, scientific, and credentialing association for 204,000 members and affiliates who are audiologists; speech-language pathologists; speech, language, and hearing scientists; audiology and speech-language pathology support personnel; and students.

Audiologists specialize in preventing and assessing hearing and balance disorders as well as providing audiologic treatment, including hearing aids. As part of their professional responsibilities, audiologists may assess and certify individuals who require IP CTS to meet their functional communication needs.

According to the summary of the NPRM, the FCC proposal would require IP CTS providers to include user account identifiers in monthly call records submitted for compensation; allow new IP CTS users to receive service for up to two weeks while their identities are verified in the User Registration Database; and simplify the handling of 911 calls placed by IP CTS users who connect to an IP CTS provider via the internet in order to place a call. ASHA is concerned that the practical impact of some of these proposed changes would reduce access to the service and unnecessarily increase the administrative burden on consumers and providers. In addition, ASHA is concerned that proposed changes to the handling of 911 calls might reduce the capability of the system to support the needs of adults with hearing impairments in the case of an emergency.

New rules should not restrict access to IP CTS for those who are deaf and hard of hearing and are protected under the Americans with Disabilities Act (ADA).

## **General Comments**

ASHA's vision is, "Making effective communication, a human right, accessible and achievable for all." Therefore, we support access to IP CTS for all individuals who require it in order to communicate effectively. ASHA has been working closely with the FCC regarding different ways individuals can establish their need for IP CTS in a manner that preserves the fiscal integrity of the program. During those discussions the proposals within

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this NPRM were not discussed.

To better evaluate the proposals within the NPRM, the FCC should provide additional context to describe the problem that the agency is trying to resolve. Requiring individual identifiers for each call seems unnecessary when the device and end-user are known to the provider and the FCC. While the burden may seem to be initially on the IP CTS provider, ASHA is concerned that the result will be an increased burden on the consumer to enter additional information prior to or during each individual call.

## **Program Administration**

Regarding temporary IP CTS access while the consumer's identity verification, ASHA supports timely access but believes more efficient option exists. ASHA has been working with the FCC on certifying a consumer's need for IP CTS. ASHA recommends that the FCC consolidate the proposals to verify, identify, and certify the individual consumer's need within one timely process. As identity verification and certification of consumer can be done quickly, the need for a temporary approval has not been established.

Both the individual account identifiers on each call and the verification proposal seem to be solutions in search of problems. Additional account specificity of each call after approving the device and user seems to be burdensome and establishing a system for temporary approval when identity verification typically takes less than a few hours seems unnecessary.

ASHA urges the FCC to combine all pending proposals regarding IP CTS into one notice of proposed rulemaking and move forward with obtaining provider, consumer, and other stakeholder input within the context of a single consolidated proposal that allows the various proposals to be placed within the context of how they would collectively impact the IP CTS program. That approach, as well as additional context as to why the proposals are deemed necessary to address specific challenges and opportunities, would be helpful for ensuring the FCC receives the feedback necessary to meaningfully improve the IP CTS program.

## **IP CTS Emergency Call Handling Requirements**

ASHA is concerned about the proposed elimination of the Communication Assistant's (CA's) involvement in IP CTS emergency calls. Similarly, ASHA is concerned about removing the current requirement that IP CTS providers must attempt to reconnect emergency calls that were terminated unintentionally. ASHA urges additional consultation with IP CTS providers and, most importantly, with consumers as the FCC seeks to improve emergency 911 access for IP CTS users. ASHA does not believe that reduced provider burden, in this context, should be a driving factor in the agency's decision-making process. The availability of the CA to provide some understanding of the context of the emergency situation and communication needs of the consumer is critical in an emergency. While the success rate of reconnecting calls by the IP CTS provider may be low, the situation would not be improved by eliminating the requirement that they attempt to do so.

Thank you for the opportunity to provide comments on the March 14, 2019, *Federal Register* NPRM. ASHA requests the opportunity to meet with the FCC to discuss further rulemaking in this area as well as in the broader context of IP CTS program overall. We look

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forward to the continued opportunity to share our members' expertise in functional communication needs assessment in support of individuals who are deaf and hard of hearing. We particularly look forward to discussing the possibility of a campaign to promote best practices in certifying an individual's need for IP CTS. If you or your staff have any questions, please contact Catherine D. Clarke, ASHA's director of education policy, at cclarke@asha.org.

Sincerely, Shari C. Robertson

Shari B. Robertson, PhD, CCC-SLP

2019 ASHA President